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| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR. ATTORNEY DOCKET NO. CONFIRMATION NO. 10/809,945 03/26/2004 Nicholas P. Harberd 620-298 6433 TILE OF INVENTION: GENETIC CONTROL OF PLANT GROWTH AND DEVELOPMENT APPLN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$0 \$0 \$1700 \$99.05/2007 EXAMINER ART UNIT CLASS-SUBCLASS IBRAHIM, MEDINA AHMED 1638 800-290000 \$0 \$11700 \$99.05/2007 EXAMINER ART UNIT CLASS-SUBCLASS IBRAHIM, MEDINA AHMED 1638 800-290000 \$0 \$11501 \$3.05.63 Ibp \$3.0 | , | | _ | 8/ | | | | | |
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| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fec Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE OR ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) PIONEER HI—BRED INTERNATIONAL, INC. JOHNSTON, IOWA Lease check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government | | ence address or indication | n of "Fee Address" (37 | | | | INTVON S | | |
| Tree Address' indication (or "Fee Address' Indication form Prof. SBA7; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) PIONEER HI−BRED INTERNATIONAL, INC. JOHNSTON, IOWA Rease check the appropriate assignee category or categories (will not be printed on the patent): □ Individual ② Corporation or other private group entity □ Government and the following fee(s) are submitted: Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. ② Payment by credit card. Form PTO-2038 is attached. ② Payment by credit card. Form PTO-2038 is at | ☐ Change of correspondence address (or Change of Correspondence | | | or agents OR, alternatively, | | | | | |
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| Typed or printed name Mary J. Wilson Registration No. 32,955 | | Coords of the United Sta | tes Patent and Trademark | Office. | Ρ Δ116 | rust 2 | 2007 | | |
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